

NAME: _____

SUPPLEMENT TO THE APPLICATION FOR
PLUMBING INSPECTOR II

Instructions: In order for us to better evaluate your qualifications for this class,
please complete and attach this form to your application.

- For each employment you worked inspecting and supervising of residential, commercial, or industrial plumbing installation work including the responsibility for the inspection of workmanship and material.
- All employers should be listed on the employment application as well.
- This form may be duplicated or you may use plain sheets of paper for additional information.

1. Employer's Name: _____

2. Employer's Address: _____

3. Your Job Title: _____

4. Dates of Employment: From (mm/yy):_____ To (mm/yy):_____

5. Number of Hours Worked Per Week: _____

6. Name of Your Immediate Supervisor: _____

7. Job Title of Your Immediate Supervisor: _____

8. Please describe in detail the work experience you received from this employer by indicating the type of plumbing projects you inspected and supervised; the methods of testing plumbing installations; types of tools, materials, and equipment you used; and how many hours you worked on those projects.

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Page 2 of 2

I hereby certify that all statements in this form are true and correct, to the best of my knowledge, and I agree and understand that any misstatements of material facts herein may cause forfeiture of all rights to any employment in the State of Hawaii civil service.

I further request and authorize the employer, its agent and/or contact person named herein to furnish verification of the statements made herein and/or employment information as requested by the Department of Personnel Services of the County of Maui.

I understand that failure to provide sufficient detailed information may result in my application being rejected. I also understand that I may not submit resumes in lieu of filling out the supplemental questionnaire.

Signature_____ Date_____